

2161.

Not ordered Dec 7/06



APPLICATION FOR ENROLLMENT IN A NON-RESERVATION SCHOOL

Full name of child William St Cyr Indian name is White Eagle
 Name of Father John St Cyr
 Name of Mother Mary Tribe Winnebago
 Reservation Winnebago Degree of Indian blood of child one half
 Is either parent white, if so, which? Mother Are either or both allotted? Y
 On what reservation? Winnebago Age of child Eighteen
 What reservation school attended? none How long? —
 If ever enrolled in a non-reservation school, name of school Reshwa Ind school Hammond Wis
 When? 10 years ago How long? 2 years
 If ever dismissed from a school, where? no When? —
 and for what reason? —

(Signed) Wm H. St Cyr

NOTE—The above blank to be signed by the child, if old enough to understand its import; if not, by the parent, guardian or other person cognizant of the facts.

CONSENT BLANK

I, Mary St Cyr (mother) parent, guardian or next of kin of the above-named child, Wm St Cyr, do hereby consent to his transfer or enrollment for a period of five (5) years in the Indian School at Carlisle, Pa.
 Dated at Minneapolis - Minnesota on the twenty fifth day of November 1906.
 (Signed) Mary St Cyr
 (Parent, Guardian or next of kin.)

PHYSICIAN'S CERTIFICATE

I hereby certify that I have personally examined the above-named Wm St Cyr and have found him physically sound, and recommend the transfer so far as his health conditions are concerned. Dated at Minneapolis Minn on the 26 day of Nov 1906.
 (Signed) A. E. Benjamin M.D.

AGENT'S OR SUPERINTENDENT'S INDORSEMENT

The statements concerning the above named Wm St Cyr, 1906 are believed by me to be correct, and I hereby recommend the transfer.
 (Signed) Arthur E. Tatam
 U. S. Indian Agent or Superintendent.

NOTE—Age limits, twelve to twenty years. Preferably fourteen to eighteen. Students must be at least one-fourth Indian, preferably full Indian. Special cases beyond the age limit can be given consideration.

Came Dec 21/06

CONSENT OF

.....
FOR THE ENROLLMENT OF

.....
IN THE INDIAN SCHOOL AT

.....
For a term of.....years.

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Name of agency or place from which pupil came.

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Date of enrollment,..... 190.....

Date of discharge,..... 190.....

Cause of discharge,..... 190.....

